

Name of Person Filing Document: \_\_\_\_\_

Your Address: \_\_\_\_\_

Your City, State, Zip Code: \_\_\_\_\_

Your Telephone Number: \_\_\_\_\_

ATLAS Number (if applicable): \_\_\_\_\_

Attorney Bar Number (if applicable): \_\_\_\_\_

Representing ☐ Self, Without a Lawyer OR Attorney for ☐ Petitioner OR ☐ Respondent

## SUPERIOR COURT OF ARIZONA MARICOPA COUNTY

Case Number \_\_\_\_\_

\_\_\_\_\_  
Petitioner

### PETITION FOR PATERNITY, CHILD CUSTODY, PARENTING TIME (VISITATION) and CHILD SUPPORT

\_\_\_\_\_  
Respondent

### General Information:

#### 1. INFORMATION ABOUT ME, THE PETITIONER

Name: \_\_\_\_\_

Address: \_\_\_\_\_

County of residence: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Occupation or Job Title: \_\_\_\_\_

My relationship to children for whom I want the paternity order:

- ☐ Mother
- ☐ I claim to be the Father
- ☐ I am a court-appointed guardian, conservator or "best friend" for the child(ren) born out of wedlock

#### 2. INFORMATION ABOUT THE RESPONDENT

Name: \_\_\_\_\_

Address: \_\_\_\_\_

County of residence: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Occupation or Job Title: \_\_\_\_\_

The other party's relationship to children for whom I want the paternity order:

- ☐ Mother
- ☐ Father

#### 3. WHY I AM FILING THIS COURT CASE IN ARIZONA AGAINST THE RESPONDENT:

(check one or more boxes that are true)

- ☐ The person is a resident of Arizona
- ☐ I believe that I will personally serve the person in Arizona (see packet on service to know about this.)
- ☐ The person agrees to have the case heard here and will file written papers in the court case;
- ☐ The person lived with the child in this state at some time;
- ☐ The person lived in this state and provided pre-birth expenses or support for the child;

- ☐ The child lives in this state as a result of the acts or directions of the person;  
☐ The person had sexual intercourse in this state as a result of which the child may have been conceived;  
☐ The person signed a birth certificate that is filed in this state;  
☐ The person did any other acts that substantially connect the person with this state (see a lawyer to help you determine this).

#### 4. INFORMATION ABOUT THE CHILDREN FOR WHOM I WANT PATERNITY ORDER:

NAMES	First	Middle	Last
(a)			
(b)			
(c)			

who were born on this date and at this place: (List in same order as above)

	Month/ Day /Year	City, State, Nation of Birth
(a)		
(b)		
(c)		

#### Statements about paternity:

##### 5. WHY YOU THINK THE PERSON IS THE FATHER OF THE CHILD(REN): (Check which box applies)

- ☐ **AFFIDAVIT:** Petitioner and Respondent signed an Affidavit of Paternity acknowledging that ☐ Petitioner or ☐ Respondent is the child(ren)'s natural father. A copy is attached.  
☐ **BIRTH CERTIFICATE:** ☐ Petitioner or ☐ Respondent is named as the natural father on each of the child(ren)'s birth certificate(s). Copy (or copies) attached.  
☐ **BLOOD TEST:** DNA Testing indicates ☐ Petitioner or ☐ Respondent is the minor child(ren)'s natural father. Report(s) of test results attached.  
☐ **PARTIES LIVING TOGETHER:** Petitioner and Respondent were not married to each other at any time during the ten months before birth of the child(ren). However, the parties lived together during the period(s) when the child(ren) could have been conceived.  
☐ **SEXUAL INTERCOURSE:** Petitioner and Respondent were not living together but had sexual intercourse at the probable date of conception of the child(ren). The mother of the children did not have sexual intercourse with anyone else during the period in which the child(ren) could have been conceived.  
☐ **OTHER:** (explain) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

##### 6. ABOUT MARRIAGE AND HUSBAND (if applicable, check one box.)

- ☐ Mother was not married at the time child(ren) were born or conceived or at least 10 months before child(ren) were born or conceived, OR  
☐ Mother was married when child(ren) were born or conceived or at least 10 months before child(ren) were born or conceived, but husband is not father of child(ren). Husband is a party to this court case because of marriage.

**Other information about the children:****7. WHERE THE CHILDREN WHO ARE UNDER 18 YEARS OLD HAVE LIVED FOR THE LAST 5 YEARS.** (Attach extra pages if necessary.)

Child's Name \_\_\_\_\_  
 Lived with \_\_\_\_\_  
 Street address \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_  
 Relationship to child: \_\_\_\_\_  
 City, State \_\_\_\_\_

Child's Name \_\_\_\_\_  
 Lived with \_\_\_\_\_  
 Street address \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_  
 Relationship to child: \_\_\_\_\_  
 City, State \_\_\_\_\_

Child's Name \_\_\_\_\_  
 Lived with \_\_\_\_\_  
 Street address \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_  
 Relationship to child: \_\_\_\_\_  
 City, State \_\_\_\_\_

**8. COURT CASES NOT INVOLVING CUSTODY OR PARENTING TIME RELATED TO THE CHILDREN UNDER 18 YEARS OLD:** (check one box)

☐ I have or ☐ I have **not** been a party or a witness in court in this state or in any other state regarding issues OTHER THAN the custody or parenting time of any of the children named above. (If so, explain below, using extra pages if necessary. IF NOT, GO ON.)

Name of each child: \_\_\_\_\_  
 Court state \_\_\_\_\_ Court location \_\_\_\_\_  
 Court case number \_\_\_\_\_ Current status \_\_\_\_\_  
 How the child is involved: \_\_\_\_\_  
 Summary of any Court Order: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**9. CUSTODY OR PARENTING TIME CASES RELATED TO CHILDREN UNDER 18 YEARS OLD:** (check one box)

☐ I do not have or ☐ I do have information about a custody or parenting time court case relating to any of the children named above that is pending in this state or in any other state. (If so, explain below, using extra pages if necessary. IF NOT, GO ON).

Name of each child: \_\_\_\_\_  
 Court state \_\_\_\_\_ Court location \_\_\_\_\_  
 Court case number \_\_\_\_\_ Current status \_\_\_\_\_  
 Nature of the court proceeding: \_\_\_\_\_  
 Summary of Court order: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**10. CUSTODY OR VISITATION CLAIMS OF ANY PERSON:** (check one box)

☐ I do not know or ☐ I do know a person other than the Petitioner or the Respondent who has physical custody or who claims custody or parenting time rights to any of the children named above. (If so, explain below, using extra pages if necessary. IF NOT, GO ON).

Name of each child: \_\_\_\_\_  
 Name of person with the claim: \_\_\_\_\_

Address of person with the claim: \_\_\_\_\_

Nature of the claim: \_\_\_\_\_

**11. CUSTODY OF THE MINOR CHILDREN.** (If applicable. Court must make findings in contested custody cases.)

- ☐ Sole custody to ☐ Petitioner or ☐ Respondent or  
☐ Joint Custody is in the best interests of the minor children for the following reasons:

**Other Statements to the Court:****12. MEDICAL EXPENSES:** ☐ There are or ☐ There are no unreimbursed medical expenses incurred by the mother, resulting from the birth of the minor child(ren). If there are, these costs and expenses should be awarded to ☐ Petitioner or ☐ Respondent according to law.**13. OTHER EXPENSES:** The parties should be ordered to divide between them any uninsured medical, dental, or health expenses, reasonably incurred for the minor child(ren), in proportion to their respective incomes.**14. DOMESTIC VIOLENCE:** (Check here if you are asking for joint custody.)

- ☐ Domestic Violence has not occurred between the parties. OR  
☐ Domestic Violence has occurred but it has not been significant. Explain why joint custody is still in the best interest of the child(ren) even though domestic violence has occurred.

**15. VENUE:** (Check here if the following statement is true):

- ☐ This is the proper court to bring this lawsuit under Arizona law because it is the county of residence of the Petitioner, or the Respondent, or the child(ren).

**DRUG CONVICTION WITHIN LAST TWELVE MONTHS:** (Check one box.)

- ☐ I have not been convicted for a drug offense or driving under the influence of drugs or alcohol in the last twelve (12) months. OR  
☐ I have been convicted for a drug offense or driving under the influence of drugs or alcohol in the last twelve (12) months. However, the parenting time arrangement I am requesting appropriately protects the child(ren). Explain how the this arrangement appropriately protects the children.

**REQUESTS I MAKE TO THE COURT:****A. PATERNITY:** Order that (legal name of the father, as on *his* birth certificate)

First

Middle

Last

\_\_\_\_\_ **be declared the natural father of the minor child(ren).****B. BIRTH CERTIFICATE:** (check the box and fill in the blank if you want this):

- ☐ Order that the name of the father be added to each child's birth certificate;

**C. LAST NAME:** (check the box and fill in the blank if you want this):

- ☐ Order that each child's last name be changed to the last name of \_\_\_\_\_;

**D. CUSTODY OF CHILDREN:** (check and complete 1 or 2):

1. **SOLE CUSTODY:** ☐ Sole custody of the minor child(ren) awarded to ☐ Petitioner or ☐ Respondent, subject to visitation as follows:
- A. ☐ Reasonable parenting time rights to the parent not having custody, as will be described in a Parenting Plan attached to the Final Order. OR
- B. ☐ Supervised parenting time between the children and ☐ Petitioner or ☐ Respondent, or no parenting time by the ☐ Petitioner or ☐ Respondent is in the best interests of the child(ren) for the following reasons: (explain here reasons for supervision or no parenting time):
- i. ☐ Supervised parenting time to the parent not having custody, only in the presence of another person, who is named by the court below upon a finding that supervised access is in the best interest of the child,
1. Person to supervise:
2. Requested restrictions on parenting time: (explain here)
- \_\_\_\_\_
- \_\_\_\_\_
3. The cost of supervised parenting time shall be paid by ☐ the parent being supervised; ☐ the parent having custody; ☐ shared equally by the parties.
- OR**
- ii. ☐ No parenting time rights to the parent not having custody.
- OR**
2. **JOINT CUSTODY:** ☐ Petitioner and Respondent agree to act as joint custodians of the children, as set forth in the Parenting Plan by the parties, signed by both parties, if the Court adopts the agreed terms of the joint custody agreement setting forth the custody and parenting time agreement between the parties. There have been no significant acts of domestic violence by either parent.

- E. CHILD SUPPORT:** Order that child support shall be paid by (check one box) ☐ Petitioner or ☐ Respondent in a reasonable amount as determined by the Court under the Arizona Child Support Guidelines. Support payments shall begin on the first day of the first month following the entry of the Paternity Decree/Order. These payments, and a fee for handling, shall be paid through the Support Payment Clearinghouse and collected by automatic wage assignment. Further, that costs for past child support and care for child(ren) in the amount of \$\_\_\_\_\_ shall be paid by ☐ Petitioner or ☐ Respondent in the amount of \$\_\_\_\_\_ each month until paid in full. Payments shall be made as stated above.

- F. EXPENSES OF MOTHER:** Order that ☐ Petitioner or ☐ Respondent pay a reasonable amount to cover unreimbursed expenses incurred by the mother related to the birth of each child(ren).

**G. HEALTH, MEDICAL, DENTAL AND VISION CARE INSURANCE AND HEALTH CARE EXPENSES FOR CHILDREN UNDER THE AGE OF 18:** Order that

☐ Petitioner shall pay for ☐ medical ☐ dental insurance ☐ vision care coverage  
and/or ☐ Respondent shall pay for ☐ medical ☐ dental insurance ☐ vision care coverage, AND

Order that Petitioner and Respondent pay for all reasonable unreimbursed medical, dental, vision care, and health-related expenses incurred for the child(ren) in proportion to their respective incomes as described on the Parents' Worksheet, which shall be submitted with the Judgment and Order.

**H. TESTING and COSTS:** Order that if paternity is contested, Petitioner and Respondent be ordered to submit to such blood and tissue tests as may be necessary by this Court to establish paternity, and that Respondent must pay all costs and expenses of this lawsuit, if he/she contests these proceedings, including the costs of the blood tests or other genetic testing; filing each child's birth certificate; attorneys' fees and court costs;

**I. OTHER ORDERS I AM REQUESTING** (explain request here):

---



---



---



---

## OATH OR AFFIRMATION AND VERIFICATION

I state to the Court under penalty of law that the information I have provided is true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Signature

Signed and sworn to or affirmed before me this date: \_\_\_\_\_ by: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

Michael K. Jeanes, Clerk of Superior Court

OR

My commission expires: \_\_\_\_\_

By: \_\_\_\_\_  
Deputy Clerk